Meaningful Use-Reasons to Move Forward

- To continue to advance Pathways' clinical practice through use of electronic behavioral health records that have interoperability with other providers
- To capitalize on incentive funding; the earlier the start, the more incentive dollars
- To comply with ARRA and to avoid financial penalties in 2015
- To capitalize on the use of electronic behavioral health record software that is fully certified

Meaningful Use Readiness Assessment

- Overwhelming task to know where to start and what to do
- No one staff person had the time to understand the complexities of meaningful use and its implementation
- An outside consultant was engaged to provide a readiness assessment and help plan strategy
- A two-day assessment aided Pathways in getting a plan in place for moving toward meaningful use in Year 1, thus maximizing incentive dollars available

Eligible Providers for Behavioral Health

- Eligible Professionals (EPs): Pathways has two physicians and five nurse practitioners
- Pathways is pursuing meaningful use through the Medicaid incentive and attested to AIU in November 2011
- For seven EPs with each eligible for \$63,750 over a six-year period, Pathways will receive \$446,250
- Each EP has signed an agreement with Pathways assigning incentive funds to Pathways. The EP must inform Pathways if he/she wants to change that assignment

Meaningful Use Assessment-Lessons Learned

- 15 core measures must be met for Stage 1 meaningful use; EPs must also use 5 measures from a list of 10 additional menu measures
 - As a result of the assessment, it was found that Pathways is about half way toward the goal of meeting meaningful use measures
 - Much work needed (and needs) to be done:
 - Upgrading EHR with meaningful use modules
 - Looking at and changing clinical workflow to meet meaningful use
 - Prioritizing meaningful use tasks

Challenges in Reaching Our Goal of Meaningful Use

- Software challenges: As we have upgraded our software, many issues have arisen with the software functionality, putting a huge burden on our end-line users
- Time challenges: Our financial resources do not allow for a full-time meaningful use staff member, thus placing additional work load on existing staff
- Additional challenges: Medicaid managed care, ever changing healthcare landscape
- Communication challenges: Communicating vital information effectively is important and sometimes difficult
- CHANGE challenges: As with any new endeavor, resistance to change is always with us